24 - )	<u>.                                    </u>
LOBBYING EXPENDITURE REPORT  COVERING JANUARY 1 THROUGH JUNE 30, 2005  DUE AUGUST 15  COVERING JULY 1 THROUGH DECEMBER 31,  DUE FEBRUARY 15	Lobbyist's Registration Number  FOR OFFICE USE ONLY
Print is life or type?  Print is life or type?  Fill in Registration Number in spaces provided.  Check the box that identifies which report is being filed and fill in the year that the report is covering in the space provided.  Complete form and return to the Board of Ethics, 2415 Quaii Dr., 3 <sup>et</sup> Ploor, Baton Rouge, LA 70808 (225) 763-8777 or (800) 842-6630.  This form must be delivered or postmarked by the due date.  This form may be faxed to (225) 763-8787.  The report covering July 1. Dec. 31 is a <u>cumulative report</u> . You must include information from the first half of the year.	Postmark Date: 00 15 05 SCAN  AUG 1 6 2005
1. Name Troullier Ferdinand  2. Business Address 9623 Brookline Ave Ba  Street and No.  Mailing Address	ton Rauge LA 70809
3. Business Phone 225-923-1-037 Arca Code and Telephone Number	
4. Total of all expenditures made January 1 through June 30:  (Include expenditures from Schedules A and B)  5. Total of all expenditures made July 1 through December 31:  (When Applicable) (Include expenditures from Schedules A and B)	0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
6. Total of all expenditures made during calendar year:  [Line 4 added with Line 5 should equal Line 6)	000
<ol><li>Did you make an expenditure exceeding \$50 on one occasion for any on</li></ol>	e legislator:
From January 1 through June 30? Yes No From July 1 through December 31? Yes No	□ NA
If the answer to either question in Number 7 above is YES, please compl	ete Schedule A and attach.

FOR GOT, Rev COLOR

Page 1 of \_\_\_\_

## LOBBVING EXPENDITURE REPORT

Lobbyist's Registration Number

eding the sum of \$250 for	r any one legist	ålor;		
☐ Yes 1? ☐ Yes	⊡ No ⊡ No		NA	
Number 8 above is YES	, please compl	ete Sche	edule A and attach.	
ding committee, select co use, subcommittee of any	ommittee, statul / committee, re	100/000	annittaa a	
'es	E No			
If the answer to Number 9 above is YES, please complete Schedule B and attach.				
CERTIFICATION OF ACCURACY				
tion contained herein is i	true and correc	t to the	best of my knowledge	
information, and belief; that all reportable expenditures have been included herein; and that no information				
was And (I CA D # 24.60	-t	u nerem	; апо тнас по питодиацов	
ne Aut [LSA-175, 24:30	ct seq.j nas oe.	en delab	crately omitted.	
me Act [LSA-45, 24:30	1 4	en delib	crately omitted.	
	Yes Now Pes No	Yes No Number 8 above is YES, please completion, social gathering, or other function ding committee, select committee, statu use, subcommittee of any committee, returng this reporting period?  Yes No is YES, please complete Schedule B are  CERTIFICATION OF ACCURACY  tion contained herein is true and correct portable expenditures have been include	Number 8 above is YES, please complete Schedion, social gathering, or other function to which ding committee, select committee, statutory consists, subcommittee of any committee, recognize turing this reporting period?  Yes ENO  is YES, please complete Schedule B and attack  CERTIFICATION OF ACCURACY  tion contained herein is true and correct to the	

Form 502, Ray 03404